

James E. McGreevey
Governor

State of New Jersey
Department of Environmental Protection

Bradley M. Campbell
Commissioner

Pesticide Control Program
PO Box 411
Trenton, NJ 08625-0411

“AFFIDAVIT”

I the undersigned attest that I have the required one-year of work experience in the following pesticide certification categories:

Upon this Department’s request, copies of my pesticide application records, employer’s statements and any other proof as deemed necessary by the Department will be provided.

I hereby swear/affirm that the aforementioned statement is true to the best of my knowledge:

Print name: _____

Signature: _____ ***Date:*** _____